

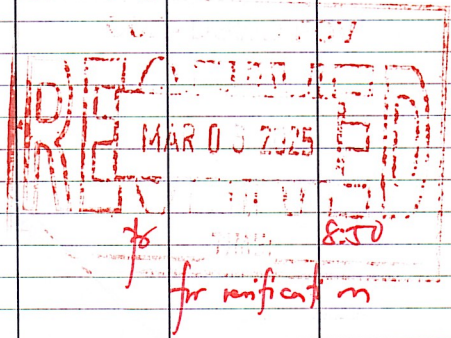
**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT FIELD OFFICE V**

Regional Center Site, Rawis, Legazpi City, Albay

**PURCHASE ORDER**

Supplier:	<b>HOTEL ST. ELLIS</b>	PO. No.:	<b>F2025-0009</b>
Address:	Brgy, Centro Bay-Bay, Rizal St, Legazpi Port District, Legazpi City, Albay	Date:	February 14, 2025
Contact No.	0524808088	Mode of Procurement:	Lease of Real Property and Venue (53.10)
Gentlemen:	Please furnish this Office the following articles subject to the terms and conditions contained herein:	Payment Term:	30-60 Calendar Days from Receipt of SOA/Billing
		Delivery Term:	As specified below
Place of Delivery:	Legazpi City, Albay	For Delivery Schedule and Queries	0963-698-4404
Date of Delivery:	As specified in the contract.	Please Contact C.M.U.:	

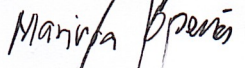
Item No.	Unit		Quantity	Unit Cost	Amount
<b>PROVISION OF FOOD AND VENUE FOR THE CONDUCT OF PROTECTIVE SERVICES DIVISION QUARTERLY MEETING IN LEGAZPI CITY, ALBAY</b>					
		<b>March 28, 2025</b>			-
	Pax	AM Snacks, Lunch, PM Snacks & Venue	75	890.00	66,750.00
		<b>June 27, 2025</b>			-
	Pax	AM Snacks, Lunch, PM Snacks & Venue	75	890.00	66,750.00
		<b>September 26, 2025</b>			-
	Pax	AM Snacks, Lunch, PM Snacks & Venue	75	890.00	66,750.00
		<b>December 17, 2025</b>			-
	Pax	AM Snacks, Lunch, PM Snacks & Venue	75	890.00	66,750.00
<p><i>Attached:</i>  <u>Standard Requirements for Venue &amp; Activities</u></p>					
<p>Contract Management Section                  In: <u>3/5/25</u> Date/Time: <u>3:30</u>                  Out: _____ Date/Time: _____</p>					



Total Amount in Words:	Two Hundred Sixty Seven Thousand Pesos and No Centavos	GRAND TOTAL	<b>267,000.00</b>
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**LIQUIDATED DAMAGES:** One-Tenth Of One Percent (0.001) of the cost of the unperformed portion of the contract for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the DSWD FOV may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.

Conforme:

  
**MARISSA BRAVEN**  
 HOTEL ST. ELLIS  
 Signature over Printed Name of Supplier  
 Date: 3/5/25

**NORMAN S. LAURIO**  
 Regional Director

Funds Available:	<b>WENDY G. RANCES</b> Accountant III	ORS No.:	<u>25-02-01247</u>
		Amount:	<u>267,000.00</u>